PART B - FEE(S) TRANSMITTAL

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Alexandria, Virginia 22313-1450 or Fax (703) 746-4000							
INSTRUCTIONS: This for appropriate. All further con indicated unless corrected by	m should be used for trans respondence including the P below or directed otherwise	mitting the ISSUI atent, advance ord in Block 1, by (a)	E FEE and PUBLIC lers and notification specifying a new o	OATION FEE (if requi of maintenance fees w orrespondence address;	ired). Blocks 1 through vill be mailed to the currand/or (b) indicating a s	5 should be completed where ent correspondence address as separate "FEE ADDRESS" for	
maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 27130 7590 12/17/2004				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
EITAN, PEARL, LATZER & COHEN ZEDEK 10 ROCKEFELLER PLAZA, SUITE 1001 NEW YORK, NY 10020				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
	2 2005			(Depositor's name)			
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APPLICATION NO	FILING DATE	DATE FIRST NAMED INV		NTOR	ATTORNEY DOCKET N	O. CONFIRMATION NO.	
	10/23/2000		David Ben-E	1	P-5365-US	2796	
09/094,000							
TITLE OF INVENTION: P	1/4 QPSK MODULATO	ж					
						DATE DUE	
APPLN TYPE	SMALL ENTITY	ISSUE FI	EE I	UBLICATION FEE	TOTAL FEE(S) DUE		
nonprovisional	МО	\$1400		\$0	\$1400	03/17/2005	
EXAMINER		ART UN	rr (CLASS-SUBCLASS	_		
VO, DON. NGUYEN		2631		375-308000			
				on the patent front page, list EITAN, PEARL, LATZER			
CFR 1 363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached Use of a Customer Number is required.			(1) the names of up to 3 registered pater or agents OR, alternatively, (2) the name of a single firm (having as		& COUCH TENEY IIP		
			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents If no name is listed, no name will be printed				
3 ASSIGNEE NAME AND	D RESIDENCE DATA TO E	E PRINTED ON	THE PATENT (prin	or type)			
PLEASE NOTE: Unles recordation as set forth i	s an assignce is identified bin 37 CFR 3 11. Completion					the document has been filed for	
(A) NAME OF ASSIGNEE (B) RESI			B) RESIDENCE: (C	RESIDENCE: (CITY and STATE OR COUNTRY)			
INTEL CORPORATION			SANTA CLARA, CA				
Plance check the appropriate	te assignee category or catego	ories (will not be pr	rinted on the patent)	: 🗖 Individual 🗷	Corporation or other priva	te group entity Government	
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- Applicant strings	s (from status indicated abov SMALL ENTITY status. See	-37 CFR 1.27.	☐ b. Applicant is	no longer claiming SM	ALL ENTITY status. See	37 CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and interest as shown by the re-	D is requested to apply the Ass Publication Fee (if required) cords of the United States Pa	sue Fee and Publica will not be accepte tent and Trademark	ntion Fee (if any) or d from anyone othe c Office.	to re-apply any previou r than the applicant; a re	sly paid issue fee to the a gistered attorney or agent	pplication identified above. ; or the assignee or other party in	
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Typed or printed name Naim Shichrur Reg 56,248							
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